

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 914830
IA NUMBER: PCT/ EP00 / 01443
FAMILY NAME: JONES
GIVEN NAME: ANTHONY PATRICK
PRIORITY CLAIMED (Y/N): Y
NO BASIC FEE (Y/N): N
ATTORNEY DOCKET NUMBER: PG3614USW
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 9194832370
NAME: DAVID J. LEVY
GLAXO SMITH KLINE
STREET: FIVE MOORE DRIVE
P.O. BOX 13398
CITY: RESEARCH TRIANGLE PARK
STATE/COUNTRY: NC ZIP: 27709
EMAIL:
APPLICATION TITLES:
MEDICAMENT DELIVERY SYSTEM

RECEIPT DATE: 09 / 04 / 01
IA FILING DATE: 02 / 23 / 00
DELAY WAIVED (Y/N): Y
DEMAND RECEIVED (Y/N): N
PRIORITY DATE: 03 / 06 / 99
US DESIGNATED ONLY (Y/N): N
COUNTRY:

TAB TO LAST POSITION, PUSH SEND